

# ES&H manual

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## Environment, Safety, and Health

### Volume I

#### Part 4: Feedback and Improvement

#### 4.1

### Directorate Environment, Safety, and Health Self-Assessment Program

(Formerly H&SM S2.04)

Recommended for approval by the ES&H Working Group

**Approved by:** Dennis K. Fisher  
Acting Deputy Director for Operations

**New document or new requirements**

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## 4.1

**Directorate Environment, Safety, and Health Self-Assessment Program\*****Contents**

1.0	Introduction.....	1
2.0	Requirements for Self-Assessment Programs.....	2
2.1	ES&H Self-Assessment Plan.....	2
2.2	Guidance for Conducting Self-Assessments.....	2
2.2.1	Assessment Activities.....	3
2.2.2	Management Walkthroughs .....	4
2.2.3	Updating Plans and Procedures .....	4
2.2.4	Maintaining Assessment Records .....	4
2.3	Annual Self-Assessment Report.....	4
3.0	Responsibilities.....	6
3.1	Workers .....	6
3.2	Associate Directors.....	6
3.3	Managers.....	6
3.4	Assurance Managers .....	6
3.5	ES&H Support Organizations .....	7
3.6	Assurance Review Office .....	7
4.0	LLNL Contacts .....	7

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\* Minor revision

## 4.1

### Directorate Environment, Safety, and Health Self-Assessment Program

## 1.0 Introduction

A self-assessment is a process by which an organization determines its performance in relationship to, or its level of compliance with, a standard or other established requirement. The Directorate Environment, Safety, and Health (ES&H) Self-Assessment Program integrates the quality assurance (QA) requirement for a self-assessment program with the Laboratory's Integrated Safety Management System (ISMS) to provide feedback and identify ES&H- and QA- related improvements requiring implementation.

The objective of the ES&H Self-Assessment Program is to evaluate the extent to which:

- Integrated Safety Management (ISM) is implemented.
- Laboratory directorates comply with the applicable ES&H requirements.
- ES&H-related requirements are integrated into all levels of facility, management, and operational activities.
- ES&H-related deficiencies and Lessons Learned are identified and analyzed in a timely manner and are managed to minimize occurrence or recurrence.

Under the directorate ES&H Self-Assessment Program, each directorate:

- Develops an ES&H Self-Assessment Plan describing the methods and frequency of ES&H self-assessments for its facilities and operations based on requirements in the Laboratory's *ES&H Manual*.
- Conducts ES&H self-assessments.
- Issues an Annual Self-Assessment Report.

Each directorate provides its Self-Assessment Plan and Annual Self-Assessment Report to the Assurance Review Office (ARO) for independent assessment and oversight.

This document contains requirements and guidance for preparing directorate Self-Assessment Plans and Annual Self-Assessment Reports. The requirements in this revision of this document become effective upon signature by the Deputy Director for Operations and apply to self-assessments conducted during calendar year 2001 and later and to annual reports for calendar year 2001 and later.

## 2.0 Requirements for Self-Assessment Programs

### 2.1 ES&H Self-Assessment Plan

Each directorate shall develop a written plan for assessing ES&H issues associated with its facilities and operations. A Self-Assessment Plan is to be approved by the Associate Director and shall be reviewed annually and modified as necessary. A directorate may develop subsidiary department or division Self-Assessment Plans at its discretion.

A Self-Assessment Plan describes a directorate's self-assessment activities, provides a schedule for completing the assessments, and identifies the documents to be generated. Each directorate-level plan contains the following components:

- A. Title (i.e., "[Organizational entity name] Self-Assessment Plan").
- B. Date.
- C. Scope. This section shall contain
  - A list of the directorate's facilities.
  - Hazard types and classifications associated with each facility.
  - A list of applicable directorate-specific self-assessments called for by the *ES&H Manual* or other Laboratory requirements.
  - A management walkthrough requirement.
- D. Self-assessment responsibilities and authorities. List, or reference a list of, the responsibilities and authorities to be consistent with Section 1.3 of Document 2.1, "Laboratory and ES&H Policies, General Worker Responsibilities, and Integrated Safety Management," in the *ES&H Manual*. Directorates may add to the listed responsibilities and authorities in their Self-Assessment Plans.
- E. Frequency of self-assessments. List, or reference a list of, the scheduled self-assessments that are to be documented. The frequency of these self-assessments will depend on the hazards associated with the facility and operation but shall not be less than once every three years.
- F. References. List applicable directorate documents that were used as references in developing the Self-Assessment Plan.

### 2.2 Guidance for Conducting Self-Assessments

The form and depth of an assessment depends on the hazards associated with the facility or operations being assessed.

The directorate may conduct various types of ES&H self-assessments, which can include the following:

- A review of ISM functions and principles to include ES&H roles, responsibilities, and authorities; adequacy of funding; and conduct of operations.
- Assessments conducted by managers of work areas and of the operations therein.
- Inspections and assessments by a directorate safety committee.
- Assessments conducted by workers.
- Inspections and reviews conducted, at the request of the directorate, by
  - The Hazards Control Department.
  - The Environmental Protection Department.
  - The Health Services Department.
  - Plant Engineering personnel with expertise in ES&H.
  - Organizations that are external to LLNL and have expertise in ES&H.

### 2.2.1 Assessment Activities

A directorate Self-Assessment Plan shall list, or reference a list of, the scheduled self-assessments that are to be documented. Assessments are conducted under management's direction at frequencies commensurate with the hazards and operations involved. The findings of these assessments are evaluated, the results are documented, and deficiencies and corrective actions are entered into the Laboratory's Deficiency Tracking (DefTrack) System as described in Document 4.2, "Environmental, Safety, and Health Deficiency Tracking System," in the *ES&H Manual*.

Prior to conducting an assessment, the results of previous assessments should be reviewed to identify any open or ongoing issues that may require additional attention. Self-assessments can be performed either by a team of individuals or by a single person. Individuals involved need to understand the operations being assessed and the associated requirements and hazards. Assistance can be obtained from ES&H support organizations or from outside contractors and consultants selected by the directorate.

Directorates identify topics to be assessed based on the hazards associated with the operations and facilities they manage.

Situations discovered during any assessment and determined to be highly dangerous require special attention. Imminently dangerous situations (DefTrack priority 1A) shall be mitigated immediately. Situations considered serious (DefTrack priority 1B) shall be mitigated within five working days of discovery.

Directorates shall also conduct an ISM self-assessment annually, which shall include a review of the following:

- The directorate ISM implementation plan, or its successor document, to verify that the document is current and being implemented.
- A representative number of
  - Activities that are covered by Integration Work Sheets (IWSs) to verify that the IWSs are current and being followed by the Responsible Individual and workers.
  - Operational Safety Plans (OSPs) (as appropriate).

### **2.2.2 Management Walkthroughs**

Managers and supervisors are required to walk through facilities as part of the overall self-assessment of operations and conditions. A summary of the results of the walkthrough shall be included in the Annual Self-Assessment Report.

### **2.2.3 Updating Plans and Procedures**

Self-Assessment Plans and schedules shall be reviewed annually and revised as needed to reflect changes in the directorate's organization or in institutional requirements that may have an impact on the Self-Assessment Program. Lessons learned from self-assessments are used to revise or update plans and should be shared with the appropriate directorates to enhance the overall quality of Laboratory operations.

### **2.2.4 Maintaining Assessment Records**

Sufficient documentation of self-assessment activities is to be developed and maintained to substantiate the activities' scope, findings, and conclusions expressed in the Annual Self-Assessment Report. Assessment records shall include a statement of the scope of assessment activities and an evaluation of, and conclusions for, any findings. These records shall be retained for a minimum of four years, or for a period of time that is consistent with other specific requirements, and shall be made available to ARO and authorized auditors upon request. The date the assessment was completed, the names of the organization or individuals who performed the assessment, and any deficiencies found are to be entered into the DefTrack system in accordance with Document 4.2.

## **2.3 Annual Self-Assessment Report**

An Annual Self-Assessment Report is to be prepared by each directorate to document the implementation status of ES&H and ISM programs within the directorate for the

prior calendar year. A copy of the Annual Self-Assessment Report shall be submitted to ARO by May 1 of the following year. As a minimum, the report shall include the following:

- A list of self-assessment activities specified in the directorate's ES&H Self-Assessment Plan and the status of these activities (e.g., completed, deferred, or cancelled).
- A summary of management walkthroughs (specified in Section 2.2.2 of this document).
- A description of how workers were involved with management in implementing the Self-Assessment Program.
- A discussion of the results of ISM self-assessment. The ISM self-assessment includes the seven principles and five core functions.
- The results of a review of IWSs.
- A summary of reportable occurrences and incidents, illness and injury statistics, and external appraisals during the assessment period.
- Key deficiency topics and ES&H-related issues and an analysis of those deficiencies and issues and their underlying factors.
- A summary of the status of items entered into the DefTrack System during the assessment period.
- Actions taken in response to the underlying factors or deficiencies identified in previous years' reports.
- A discussion of actions taken as a result of the LLNL Lessons Learned Program.
- A summary describing how the directorate's Self-Assessment Program was used to improve ES&H performance in the directorate and any recommended actions that managers can take to improve performance in the directorate.
- A discussion of the directorate's contributions that were significant in helping to meet LLNL's Contract 48 ES&H performance measures. (State performance measures that are relevant to the directorate's performance.)
- Signature of the ES&H Assurance Manager and the document date.



## 3.0 Responsibilities

The responsibilities for each individual and organization are listed under each title.

### 3.1 Workers

- Notify management of ES&H deficiencies, issues, and concerns.
- Participate in assessments of their work areas, when appropriate.
- Participate in the corrective action process, when appropriate.

### 3.2 Associate Directors

- Authorize and approve the Self-Assessment Plan.
- Provide resources and other support for the performing of self-assessments.
- Ensure funding for corrective actions that are developed from the Self-Assessment Plan.

### 3.3 Managers

- Assess their assigned operations and facilities.
- Ensure that corrective actions are implemented.
- Ensure that workers are involved in the self-assessments and related corrective actions of their work areas.

### 3.4 Assurance Managers

- Prepare the directorate ES&H Self-Assessment Plan and the Self-Assessment Annual Reports.
- Provide oversight of directorate facilities and operations to assure proper implementation of ES&H activities within the directorate.
- Provide the DefTrack rollup (i.e., monthly summary) file, or assure that it provided, to ARO.
- Perform independent assessments of the ES&H program within the directorate.

### **3.5 ES&H Support Organizations**

- Notify the affected directorate of the assessments and inspections conducted at the request of the directorate.
- Provide a copy of the resulting reports to the responsible management chain and the directorate assurance manager.
- Immediately bring imminently dangerous situations or serious violations to the attention of the authorizing work supervisor.

### **3.6 Assurance Review Office**

- Review the adequacy of the Annual Self-Assessment Report by comparing the report to the requirements in Section 2.3 of this document.

## **4.0 LLNL Contacts**

Contact the following individuals and groups for additional information about this document:

- ARO
- Directorate Assurance Offices
- ES&H Teams